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Extension(1)

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PTO/SB/22 (10-00)

Approved for use through 10/31/2002. OMB 0651-0031

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number: 210121.427C18																																																													
COPY OF PAPERS ORIGINALLY FILED	In re Application of Jiangchun Xu et al.																																																														
	Application Number 09/651,236	Filed August 29, 2000																																																													
	For COMPOSITIONS AND METHODS FOR THE THERAPY AND DIAGNOSIS OF PROSTATE CANCER																																																														
	Group Art Unit 1655	Examiner J. Souaya																																																													
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a Reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table><tr><td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$110</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$_____</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$_____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$_____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$_____</td></tr><tr><td><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$_____.</td><td></td></tr><tr><td><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</td><td></td></tr><tr><td><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</td><td></td></tr><tr><td><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</td><td></td></tr><tr><td><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-1090</u>.</td><td></td></tr><tr><td colspan="2">I have enclosed a duplicate copy of this sheet.</td></tr><tr><td>I am the <input type="checkbox"/> applicant/inventor.</td><td colspan="2"></td></tr><tr><td><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71</td><td colspan="2"></td></tr><tr><td colspan="3">Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</td></tr><tr><td><input checked="" type="checkbox"/> attorney or agent of record.</td><td colspan="2"></td></tr><tr><td><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</td><td colspan="2"></td></tr><tr><td colspan="3">Registration number if acting under 37 CFR 1.34(a)..</td></tr><tr><td colspan="3">WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</td></tr><tr><td colspan="2"><u>2/19/02</u></td><td>Signature</td></tr><tr><td colspan="2">Date</td><td></td></tr><tr><td colspan="3">Jeffrey Hundley</td></tr><tr><td colspan="3">Typed or printed name</td></tr><tr><td colspan="3">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</td></tr><tr><td><input type="checkbox"/> *Total of _____ forms are submitted.</td><td colspan="2"></td></tr></table>			<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$_____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$_____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$_____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$_____	<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$_____.		<input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.		<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		<input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-1090</u> .		I have enclosed a duplicate copy of this sheet.		I am the <input type="checkbox"/> applicant/inventor.			<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71			Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			<input checked="" type="checkbox"/> attorney or agent of record.			<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).			Registration number if acting under 37 CFR 1.34(a)..			WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			<u>2/19/02</u>		Signature	Date			Jeffrey Hundley			Typed or printed name			NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			<input type="checkbox"/> *Total of _____ forms are submitted.		
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